DECLARATI		Attor	ney Docket Number	21587	587							
POWER OF AT FOR UTILITY O		First	Named Inventor	Tesfaye Biftu								
PATENT APPL	ICATION		CC	MPLETE IF KNOWN								
(37 CFR 1.	63)	Appli	cation Number									
Declaration Submitted	Declaration Submitted after Initial		; Date									
with Initial OR Filing	Filing (surcharge (37 CFR 1.16 (e))	Group	o Art Unit									
	required)	Exam	iner Name									
As a below named inventor	, I hereby declare tha	at:										
My residence, mailing address, and citizenship are as stated below next to my name.												
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
ANTIPROTOZOAL IMIDAZOPYRIDINE COMPOUNDS												
the specification of which (Title of the Invention)												
bears the Attorney Docket Number and Title of the Invention noted above												
OR is attached hereto												
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International												
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as												
amended by any amendment			ents of the above identify	ied specification, including t	he claims, as							
I acknowledge the duty to di as defined in 37 CFR 1.56, in the filing date of the prior ap	ncluding for continuati	ion-in-p	art applications, material	information which became	available between							
I hereby claim foreign priority	v benefits under 35 U.S	S.C. 119	(a)-(d) or (f), or 365(b)	of any foreign application(s)	for patent or inventor's							
certificate(s), or 365(a) of any	PCT international app	plication	which designated at lea	st one country other than the	e United States of							
America, listed below and har or of any PCT international a												
Prior Foreign Application	pprication naving a rin	- Gate	Foreign Filing Date		Priority Claimed?							
Number(s)	Country		(MM/DD/YYYY)	Attorney Docket Nu								

Additional foreign applica	ation numbers are listed o	n a suppl	emental priority data sheet	PTO/SB/02B attached hereto.								
I hereby claim the benefit under	35 U.S.C. 119(e) of any	United S	tates provisional application	n(s) listed below.								
Application Num	ber(s)		Filing Date (MM/DD/YYYY)	Attorney Do	ocket Number							
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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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Name Registration Number								Na	ame				egistration Number	
Mitul I. Desai			46,661	Number	D	avid	L. Ros	e				26,332	Number	
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Direct all correspondence to: X Customer Number 000210														
Name	Mitul I. Desai													
Address	Merck & Co., Inc	Patent D	epartme	ent										
Address	P.O. Box 2000,	RY60-30							4					
City	Rahway				Sta	te	NJ		ZIP	C	07065-0907			
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belief are bel the like so m	are that all statem ieved to be true; a ade are punishable ze the validity of	nd further to by fine or	that thes	se statements onment, or bo	were r	nade der 18	with th 3 U.S.C	ie know	ledge that	willful	l false s	statemen	ts and	
Name of Sole o	r First Inventor:	1] A p	etition	has bee	en filed fo	r this u	nsigne	d invente	or	
Gi	ven Name (first	and middl	e [if an	yl)				F	amily Na	me or	Surna	me		
Tesfaye					В	iftu								
Inventor's C Signature	-	Box							Date	Se	pter	mkr	12,2005	
Residence: City	Westfield		St	ate NJ		Cou	ntry	US			enship	1		
Mailing Address	Merck &	Co., Inc. P	.O. Box	2000										
City	Rahway				St	ate	NJ	ZIP	07065-0	907	Cour	ntry U	.S.A.	
X Additional	inventors are being	named on th	he1	supplemental .	Additio	nal ln	ventors	(s) sheet	(s) PTO/SB	/02A at	tached I	hereto.		



ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor							
Give	n Na	ame (first and middle [if	anyl)					Fa	mily N	ame o	r Surna	me	
Matthew J.			7 1/		V	Vyvratt					-		•
Inventor's Signature	/l	Parther J. C	ils	wo	w	2		-	Date	Le	st.	22,	2005
Residence: City	Μοι	untainside	State	NJ		Count	ry U	S			enship		
Mailing Address		Merck & Co., Inc. P.O. I	3ox 2000)									
City	Rahway			Stat	te N.	J 	ZIF	0706	5-0907		Count	ry U	.S.A.
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor									entor				
Give	n Na	ame (first and middle [if	any])					Fa	mily N	ame o	r Surna	me	
Michael H.					F	isher							
Inventor's Signature									Date				
Residence: City	Ringoes State NJ				Country US Citizenship US								
Mailing Address	Merck & Co., Inc. P.O. Box 2000												
City Rahway		State		NJ	J ZIP 07065		-0907		Count	ry L	J.S.A.		
Name of Addition	nal J	oint Inventor, if any:				A pe	tition	has bee	en filed f	for this	unsigne	d inv	entor
Give	n Na	nme (first and middle [if	any])		_ _			Fa	mily Na	ame o	r Surna	me	
Inventor's Signature						Date							
Residence: City			State			Counti	-y			Citiz	enship		
Mailing Address													
City		Rahway			Sta	te NJ		ZIP 0	7065-09	07	Count	ry	
		oint Inventor, if any:				A pe	ition		n filed f				entor
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City		Rahway			Sta	te NJ		ZIP	07065	5-0907	Cou	intry	

DECLARATI	Atto	rney Docket Number	2158	37								
POWER OF AT		First	Named Inventor	Tesfa	ye Biftu		-					
PATENT APPI			Co	OMPI	ETE IF KNOWN							
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with Initial OR Filing	Filing (surcharge (37 CFR 1.16 (e)) required)		p Art Unit									
	required)	Exan	niner Name									
As a below named invento	r I hereby declare t	hat:										
My residence, mailing addre			ed below next to my non	ma								
wry residence, maning addit	ess, and entizensing at	c as state	d below flext to my flan	iic.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
ANTIPROTOZOAL IMIDAZOPYRIDINE COMPOUNDS												
(Title of the Invention)												
the specification of which												
bears the Attorney Docket Number and Title of the Invention noted above												
OR is attached hereto												
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International												
Application Number	and	i was am	ended on (MM/DD/YY)	YY)		(if app	olicable).					
I hereby state that I have rev amended by any amendmen				ified sp	ecification, including	the clair	ms, as					
I acknowledge the duty to d												
as defined in 37 CFR 1.56, if the filing date of the prior approach								en				
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or of any PCT international a							or 8 certi	ncate(s),				
Prior Foreign Application			Foreign Filing Dat	te	-		Priority	Claimed?				
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Application Nun	nber(s)		Filing Date (MM/DD/YYYY)		Attorney Docket Number							
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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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Mitul I. Desai				46,66	51		1	David L. Rose						26,33	32		
Direct all correspondence to: X Customer Number 000210																	
Name	Mitul I	. Desai															
Address	Merck	& Co., Inc	Patent D	epart	ment					_							
Address	P.O. B	ox 2000, R	Y60-30														
City	Rahwa	у					St	ate	NJ			ZIP		07065-0907			
Country	USA				Tele	phone	(732))594-3	190			Fax		(732)5	94-47	20	
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Name of Sole o	r First	Inventor:] A [etitio	on has b	ee	n filed for	r this	unsigne	d inv	entor	
Gi	ven Na	ame (first ar	ıd middl	e [if	any])		_				Fa	amily Na	me o	r Surna	ame_		
Tesfaye								Biftu	•		_						
Inventor's Signature												Date					
Residence: City	Wes	tfield			State	NJ		Cou	ntry	us			Citizenship US				
Mailing Address		Merck & C	o., Inc. P	.O. B	ox 200	0											
City		Rahway					S	State	NJ	ZI	P	07065-09	907	Cou	ntry	U.S.A	
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DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor								
Give	n Na	me (first and middle [if	fany])			Family Name or Surname								
Matthew J.					w	yvratt				,				
Inventor's Signature									Date					
Residence: City	Μοι	ıntainside	State	NJ		Count	ry	JS		Cit	izens	hip U	s	
Mailing Address		Merck & Co., Inc. P.O. I	3ox 2000)							_			
City		Rahway		Stat	e NJ	.	ZI	P 070	65-090	,	Cou	ıntry	U.S	S.A.
Name of Addition	ıal J	oint Inventor, if any:				A pe	titior	n has b	een file	l for th	nis uns	igned i	nver	ntor
Give	n Na	me (first and middle [if	any)					F	amily 1	Vame	or Su	rname		
Michael H.	٨/ـ				. Fi	sher		•	_					
Inventor's Signature	Lox	is L. Zuegner/II	IVLes		pre	senta	tiv	e	Date	X	9//	5/0	5	
Residence: City	Rinį	goes	State	NJ		Count	ry L	JS		Cit	tizens	hip U	S	
Mailing Address Merck & Co., Inc. P.O. Box 2000														
City		Rahway		State	NJ		ZIP	0706	5-0907		Cor	untry	U.:	S.A.
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								ntor						
Give	n Na	ame (first and middle [if	any])					F	amily	Name	or Su	rname		
Inventor's Signature						Date								
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		oint Inventor, if any:				A pe	tition		een file					ıtor
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Inventor's Signature									Date					
Residence: City			State			Count	ry			Cit	izens	hip		
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City		Rahway			Sta	te NJ ZIP 07065-			65-090	5-0907 Country				

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION Supplemental Sheet For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name	Michael H.	Fisher	Page 4	of <u>4</u>
			· —	

Name of Legal Representative:	A pet	ition has been filed	I for this non-signing leg	al represent	ative			
Given Name (first and middle (if any))		Pamily Name o	or Surname					
Louis L.		 	legner III					
Legal Representative's X Signature	JUL -			Date X	9/15/05			
Residence: City Flemington	State	NJ c	ountry USA	Citizenship	USA			
Mailing Address 28 Spring Street)							
Mailing Address								
City Flemington		State NJ	_{Zip} 08822	Country	USA			
Name of Additional Legal Representative, if any	<i>r</i> :	A petition ha	as been filed for this no	n-signing leg	al representative			
Given Name (first and middle (if any))		Family Name or Surname						
Legal Representative's Signature								
Residence: City	Stat	е	Country	Citizenship				
Mailing Address								
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Name of Additional Legal Representative, if any	<u>/: </u>	A petition ha	as been filed for this nor	n-signing leg	al representative			
Given Name (first and middle (if any))		Family Name or Sumame						
Legal Representative's Signature		Date						
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City	State	9	Zip	Country				

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.